



Bib Data Sheet


**UNITED STATES DEPARTMENT OF COMMERCE**  
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<b>SERIAL NUMBER</b> 09/484,247	<b>FILING DATE</b> 01/18/2000 <b>RULE</b> _	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3739	<b>ATTORNEY DOCKET NO.</b> 6530.0008-03
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**APPLICANTS**

Charles R. Slater, Fort Lauderdale, FL ;

**\*\* CONTINUING DATA \*\*\*\*\***
 THIS APPLICATION IS A DIV OF 08/806,386 02/27/1997  
 WHICH IS A DIV OF 08/354,992 12/13/1994 ABN
**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***

03/03/2000

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> FL	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 12	<b>INDEPENDENT CLAIMS</b> 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged _____ Examiner's Signature Initials				

**ADDRESS**
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**TITLE**

Bipolar endoscopic surgical scissor blades and instrument incorporating the same

<b>FILING FEE RECEIVED</b> 820	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
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